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FEC

Use

Only

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## STATEMENT OF **ORGANIZATION**

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**FEC FORM 1** 

(Revised 12/2007)

**FORM** Office Use Only NAME OF (Check if name Example: If typing, type .12FE4M5 COMMITTEE (in full) is changed) over the lines. A More Perfect Union Political Action Committee Street ADDRESS (number and street) (Check if address is changed) Washington [200<sub>0</sub>03 DC CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS COMMITTEE'S WEB PAGE ADDRESS (URL) COMMITTEE'S FAX NUMBER |-|479 |-|<sup>246</sup>2 DATE **FEC IDENTIFICATION NUMBER** IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Randall Broz Type or Print Name of Treasurer Date Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact:

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100